N21000005503

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COVER LETTER

TO: Amendment Section Division of Corporations

Tallahassee, FL 32314

NAME OF CORPORATION:	NIZATION FOR ANTI RECIDIVISM AND ECONOMIC OPPORTUNITY INCORPORATED
DOCUMENT NUMBER: N21000005503	
The enclosed Articles of Amendment and fee are	e submitted for filing.
Please return all correspondence concerning this	matter to the following:
CHERYL CANZANELLA	
	(Name of Contact Person)
NATIONAL ORGANIZATION FOR ANTI RE	CIDIVISM AND ECONOMIC OPPORTUNITY INCORPORATED
	(Firm/ Company)
3357 ALMEDA STREET	
	(Address)
JACKSONVILLE, FL 32209	
	(City/ State and Zip Code)
CHERYLCANZ@GMAIL.COM	
E-mail address: (to be	e used for future annual report notification)
For further information concerning this matter, p	please call:
CHERYL CANZANELLA	904 803-3708 at
(Name of Contact P	erson) (Area Code) (Daytime Telephone Number)
Enclosed is a check for the following amount ma	ade payable to the Florida Department of State:
☐ \$35 Filing Fee	
Mailing Address Amendment Section Division of Corporations P.O. Box 6327	Street Address Amendment Section Division of Corporations The Centre of Tallahassee

2415 N. Monroe Street, Suite 810

Tallahassee, FL 32303

Articles of Amendment to Articles of Incorporation of

NATIONAL ORGANIZATION FOR ANTI RECIDIVISM AND ECONOMIC OPPORTUNITY INCORPORATED

Dept. of State)	
er of Corporation (if know	vn)
es, this <i>Florida Not For P</i>	Profit Corporation adopts the following
ion:	
DA INC.	The new
tion" or "incorporated" (or the abbreviation "Corp." or "Inc."
)	
	6 5 202
	NOV - 1
ce address in Florida, en	ter the name of the
address:	II: 06
	<u> </u>
(Florid	la street address)
	. Florida
(City)	(Zip Code)
Agent:	
	obligations of the position.
ignature of New Registere	d Agent, if changing
	ce address in Florida, enaddress: (City) Agent: miliar with and accept the

If amending the Officers and/or Directors, enter the title and name of each officer/director being removed and title, name, and address of each Officer and/or Director being added:

(Attach additional sheets, if necessary)

Please note the officer/director title by the first letter of the office title:

P = President; V = Vice President; T = Treasurer; S = Secretary; D = Director; TR = Trustee; C = Chairman or Clerk; CEO = Chief Executive Officer; CFO = Chief Financial Officer. If an officer/director holds more than one title, list the first letter of each office held. President, Treasurer, Director would be PTD.

Changes should be noted in the following manner. Currently John Doe is listed as the PST and Mike Jones is listed as the V. There is a change, Mike Jones leaves the corporation. Sally Smith is named the V and S. These should be noted as John Doe, PT as a Change, Mike Jones, V as Remove, and Sally Smith, SV as an Add.

Example: X Change X Remove X Add	PT John Do V Mike Jo SV Sally Sr	nes	
Type of Action (Check One)	<u>Title</u>	Name	Address
Change Add	P	SHAMARI J LEWIS	3357 ALMEDA STREET JAX., FL. 32209
X Remove 2) Change Add	<u>C</u>	SHAMARI J LEWIS	3357 ALMEDA STREFT JAX., FL. 32209
x Remove 3) Change Add Remove		· · · · · · · · · · · · · · · · · · ·	
4) Change X Add	C	CHERYL CANZANELLA	3357 ALMEDA STREET JAX., FL. 32209
Remove 5) Change	P	DR. CHERYL BROWN, PHD	3357 ALMEDA STREET JAX., FL. 32209
Remove 6) Change Add Remove			
		<u>cles, enter change(s) here</u> : (Be specific)	

The date of each amendment(s) adoption:date this document was signed.	, if other than the
Effective date if applicable: (no more than 90 days after amendment	

The amendment(s) was/were adopted by the members and the number of votes cast for the amendment(s) was/were sufficient for approval.

(CHECK ONE)

Adoption of Amendment(s)

There are no members or members entitled to vote on the amendment(s). The adopted by the board of directors.	he amendment(s) was/were
Dated 30 OCTOBER 2024	
Signature Signature	
(By the chairman or vice chairman of the board, president have not been selected, by an incorporator – if in the han other court appointed fiduciary by that fiduciary)	
CHERYL CANZANELLA	
(Typed or printed name of per	rson signing)
CFO	
(Title of person sig	gning)